NOTICE OF FEE DUE

DATE:	01-05-	05			
TO:	15Sec	Ree.			
FROM:	Office of Initial Pate	ent Examination	ı	÷	•
SUBJECT:	Fee Due				
APPLICATION	NUMBER 10	74948	7		
Office for the authorization t	or the attached docum following reason. Ple o charge a deposit ac e. If an authorization	ease check the a count. If an au	application fo thorization is	or the appropriate present, please char	_
Insufficien	t fee by check		•		
Insufficient	funds in deposit amou	nt			
Declined cr	redit card				
Non-author	ization for charge to de	eposit account		·	
No fee subr	mitted per requirement				
The correct fee c	ode: <u>/ 5 </u>		amount	\$ 14w \$ 1370^ =\$ 14w	
The suspended for	ee code: 1999 (M	6.	amount	\$_1370-	-
Fee Due			amount	=\$ <u>/ 4 w</u>	-
f you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz 703-308-3642					
Ferminal Operate	or	Harry		•	